

EXECUTIVE APPROVALS

NAME	DATE
CRUSHY	
ENNETT	11/27/99
ARMAN	4/24/99
MARTIN	
MURPHY	

98-77-38

Oklahoma City  
Medical Imaging Center of Oklahoma

Lecia Pate

RECEIVED	NAME	DATE APPROVED
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	RVP	4/23/99
	SHARON FAULKNER	4/21/99
	SVP/GVP - DIAGNOSTICS	11/24/99
	MANAGED CARE	1/20/99
	TEAM LEADER	1/6/98
	DEVELOPMENT	4-14-99

DUE DILIGENCE CHECKLIST

NARRATIVE	✓	EQUIPMENT LIST	✓
DUE DILIGENCE	✓	PROFORMA	✓
WEEK UPDATE			
STAFFING PLAN	✓		
BUILDING/LH PLANS			
LEASE REVIEWED			

New Store  
New Market

EXHIBIT

1

## HEALTHSOUTH Rehabilitation Corporation

## Wire Transfer Request

Operating Unit: CORP. DEV. Date Requested: 5/24/99  
 Requested By: Chris Ransom for Lecia Pate Date/Time Needed:

Purpose of Wire: Acquisition of Medical Imaging Center of Oklahoma

Wire Amount: \$2,400,000

A/R   
 EQ. \$525,000  
 N/C   
 GW \$1,875,000  
 Total \$2,400,000

## Wire Instructions:

Bank Name:

Bank City, State:

ABA Number:

Account Name:

Address of Person/Business on acct.

Account Number:

Further Credit to:

Account Number:

Reference:

Notification:

**\*\*Items in bold must be filled in\*\***

Approval: Operating Unit: *Sharon F. [Signature]*  
11.7.3/19

Mike Martin:

Treasury *[Signature]*  
6/10/99

Please forward completed request forms to Catherine Noojm by 10:30 AM on the date that the wire is needed.

Medical Imaging Center of Oklahoma  
Oklahoma City, OK  
Executive Summary

Purchase Price Summary:	Ownership %	100%	Start-up Capital Requirements	Cash Paid to Seller
Goodwill Up Front			N/A	1,875,000
Goodwill Over Time			N/A	200,000
Non Compete Up Front			N/A	0
Non Compete Over Time			N/A	500,000
Accounts Receivable			N/A	0
Working Capital			400,000	N/A
Land			0	0
Leaseholds			0	0
Building			0	0
Equipment			0	525,000
Assumption of Seller's A/P			N/A	0
Total Consideration			<u>400,000</u>	<u>3,100,000</u>
Goodwill Over Time			N/A	200,000
Non Compete Over Time			N/A	500,000
Assumption of Current Debt			N/A	0
Cash Paid at Closing			<u>400,000</u>	<u>2,400,000</u>

Profile Info:	Statistics Per Procedure:	YTD Annualized	Projected Year 1
Building Square Footage		85,974	
Modalities: (Circle Available Mods)	Purchase Price/Procd	306.01	418.25
MRI CT MM US XR	Gross Revenue/Procd	306.01	298.21
Procedures Per Day	Net Revenue/Procd	40.94	35.67
Procedures Per Year (YTD Annualiz)	Salary/Procd	177.28	185.24
Projected Procedures Per Day	Total Expense/Procd		

Market Info:

HS Market -

HS Mkt Code  
HS Mkt Description  
Is this a new HS Mkt for Diagnostics?  
If no, please attach schedule of all Diagnostic centers in that market.

OK-01  
Oklahoma City, OK  
Yes

COMPLETE  
4/27

MSA -

MSA  
Is this a new MSA for Diagnostics?  
If yes, please attach schedule of at least 3 existing HS comparable Diagnostics centers.

Oklahoma City, OK  
Yes

Income Statement Summary:

	Annalized	Year 1	Gross Rev	Net Rev
Gross Revenue	3,164,213	4,513,898	100%	140%
Contractual Adjustments	0	1,295,489	29%	40%
Net Revenue	3,164,213	3,218,409	71%	100%
EBITDA (Cash Flow)	1,442,637	1,594,537	35%	50%
EBIT	1,331,119	1,219,220	27%	38%
Net Income	1,275,686	982,032	22%	31%

Return & Multiple Summary:

	3 Yr Avg Return Net Inv	Multiples ADJ YTD Annalized	Projected YR 1
Net Revenue		0.98	0.96
EBITDA	41.75%	2.15	1.94
EBIT	32.17%	2.33	2.54
Net Income - ROA	26.71%	2.43	3.16
Cash Flow	20.00%		
Payback Period (Years)	2.45		

**Medical Imaging Center of Oklahoma  
Oklahoma City, OK  
Valuation**

	Year 0	Year 1	Year 2	Year 3	Year 4	Year 5
Upfront	1,875,000	1,941,867	2,008,323	2,075,000	2,075,000	2,075,000
	0	100,000	200,000	300,000	400,000	500,000
	0	0	0	0	0	0
	400,000	400,000	400,000	400,000	400,000	400,000
	0	0	0	0	0	0
	0	0	0	0	0	0
	525,000	1,672,370	2,084,870	2,094,870	2,104,870	2,114,870
	0	215,000	285,000	275,000	285,000	295,000
	0	0	0	0	0	0
End of Year	2,800,000	4,329,537	4,958,203	5,144,870	5,284,870	5,184,870
Net Total	2,800,000	3,954,220	4,152,735	3,907,233	3,293,352	3,277,451

	Adjusted PY 1997 3 of mos	Adjusted YTD 1998 12	Year 1	Year 2	Year 3	Year 4	Year 5
Procedures	0	10	10	11	12	12	12
	0	3	4	5	6	5	6
	0	28	28	30	33	37	37
	0	41	42	47	52	54	56
Revenue	0	3,184,213	4,513,398	5,118,813	5,653,791	5,665,597	5,756,915
Contractuals	0	0	1,295,489	1,509,991	1,724,406	1,784,663	1,842,213
Bad Debt	0	0	0	0	0	0	0
Revenue	0	3,184,213	3,218,409	3,608,822	3,929,385	3,880,934	3,914,702

Salaries & Wages	0	423,379	358,379	363,755	369,211	374,749	380,371
Taxes & Benefits	0	74,521	53,757	54,583	55,382	56,212	57,056
Contract Labor	0	10,327	10,327	10,327	10,327	10,327	10,327
Total Salary Related Expense	0	508,228	422,463	428,666	434,920	441,289	447,754
15% Professional (Rad) Fees	0	474,632	514,945	577,380	589,408	582,140	587,205
2% Billing and Collection	0	75,086	96,552	108,259	117,882	116,428	117,441
Contract Services	0	0	0	0	0	0	0
Medical Supplies	0	200,849	194,254	214,793	237,653	244,602	254,941
Utilities (Includes Telephone)	0	45,358	45,358	45,358	45,358	45,358	45,358
Other Variable	0	205,149	154,304	154,304	154,304	154,304	154,304
Total Variable Expense	0	1,001,074	1,005,424	1,100,093	1,144,604	1,142,832	1,160,249

Equipment Rental	0	0	0	0	0	0	0
Lease/Rent Expense - Bldg	0	45,120	56,000	56,000	56,000	56,000	56,000
Equip R&M & Serv Cont	0	121,000	93,830	212,000	212,000	212,000	212,000
Depreciation & Amort LHI	0	106,651	223,442	278,275	280,192	282,109	284,025
Amortization of Intangibles	0	4,867	151,875	151,875	151,875	151,875	151,875
Insurance	0	25,239	25,239	25,239	25,239	25,239	25,239
Advertising/Marketing	0	20,915	20,915	20,915	20,915	20,915	20,915
Interest	0	55,433	237,188	235,317	233,281	231,064	228,652
Management Fees	0	0	0	0	0	0	0
Total Fixed Expense	0	379,226	808,489	979,822	979,502	979,202	978,707
Total Expenses	0	1,858,528	2,226,377	2,508,360	2,569,026	2,563,324	2,586,710

Net Inc before Mgmt Fees	0	1,275,586	982,032	1,100,262	1,370,358	1,317,610	1,327,993
Management Fee	0	0	0	0	0	0	0
Intercompany Interest	0	0	0	0	0	0	0

PARTNERSHIP INCOME	0	1,275,586	982,032	1,100,262	1,370,358	1,317,610	1,327,993
Income Tax	0	0	0	0	0	0	0
Other Income (Expense)	0	0	0	0	0	0	0
TOTAL INCOME	0	1,275,586	982,032	1,100,262	1,370,358	1,317,610	1,327,993

Contractual % (not incl Bad Debt)	0.00%	0.00%	28.70%	29.50%	30.50%	31.50%	32.00%
Net Margin (incl interest & not fees)	0.00%	42.07%	37.88%	37.01%	40.81%	39.90%	39.76%

	Ownership %						
HEALTHSOUTH EARNINGS	100%	982,032	1,100,262	1,370,358	1,317,610	1,327,993	
Management Fee	0	0	0	0	0	0	
Development Fee Rec (Paid)	0	0	0	0	0	0	
Amortization Corp. Goodwill	0	0	0	0	0	0	
Interest	0	0	0	0	0	0	
HEALTHSOUTH EBIT		237,188	235,317	233,281	231,064	228,652	
		1,219,220	1,335,579	1,603,639	1,548,674	1,556,645	

Int'l Inc on Financing Total Assets	0	0	0	0	0	0	
Partnership Interest	0	0	0	0	0	0	
HEALTHSOUTH AFTER TAX INCOME		(237,188)	(235,317)	(233,281)	(231,064)	(228,652)	
		982,032	1,100,262	1,370,358	1,317,610	1,327,993	

Add Back portion of:							
(a) Partnership Amortization		151,875	151,875	151,875	151,875	151,875	
(a) Depreciation		223,442	278,275	280,192	282,109	284,025	
Amortization of Intangibles		0	0	0	0	0	
HEALTHSOUTH EBITDA		1,664,537	1,785,729	2,035,708	1,982,658	1,992,545	

Sum of Capital Expenses & Earnout	(2,800,000)	(1,262,870)	(462,000)	(20,000)	(20,000)	(20,000)	
Goodwill Over Time		(66,667)	(66,667)	(66,667)	0	0	
Non-Compete Over Time		(100,000)	(100,000)	(100,000)	(100,000)	(100,000)	
(Inc) Dec Accts Rec (365/YR)		(529,054)	(64,145)	(52,728)	7,985	(5,531)	
(Inc) (Dec) Accts Pay (365/YR)		148,119	28,240	5,488	(218)	2,147	
NET CASH FLOW	(2,800,000)	(315,934)	1,099,159	1,801,799	1,970,464	1,889,142	

	Annualized YTD	Prof Yr 1					
Purchase Price/Prod	85.974						
EBITDA Multiple	2.15	1.94					

	3 Yr Avg	3 Yr Avg	Year 1	Year 2	Year 3	Year 4	Year 5
HS EBITDA	41.8%	40.3%	44.7%	38.0%	40.3%	38.1%	38.0%
HS EBIT	32.2%	31.3%	34.2%	28.8%	31.7%	29.6%	45.3%
HS Net Income - ROA	26.7%	26.2%	27.5%	23.7%	27.1%	25.3%	28.7%
HS Cash Flow	20.0%	27.2%	-8.9%	23.7%	35.7%	35.9%	54.4%
HS IRR		49.2%					

(a) HS % of ownership

PURCHASE PRICE		Multiple of Adj EBITDA
Total Consideration	3,500,000	2.43
Goodwill Over Time	200,000	
Non-Compete Over Time	500,000	
Assumption of Current Debt	0	
Cash Paid at Closing	3,500,000	
Ownership %	100.00%	

BALANCE SHEET (prepared for HS ownership)			
Assets	Total	Days	Yrs of Depr
Working Capital	400,000		
Accts Receivable	0	60	
Land	0		
Building	0		
Leasehold Improvements	0		30
Equip - Book Value	525,000		15
Total Tangible Assets	925,000		5

	Pay Out Period/Yrs	Yrs of Amort
Goodwill Up Front	1,375,000	40
Goodwill Over Time	200,000	40
Non-Compete Up Front	0	5
Non-Compete Over Time	500,000	5
Total Intangible Assets	2,575,000	
Total Assets	3,500,000	

Liabilities	Amount	Interest Rate	Term (Days/Years)
Assumption of Seller's liabilities -			
A/P & Other Liabilities	0		45
Notes Payable & Capital Leas	0	8.50%	5
Acquisition Debt -			
Cash Consideration at closing	2,500,000	8.50%	30

CAPITAL EXPENDITURES & EARNOUT			
	Equipment	Leaseholds	Earnout
Upfront	0	0	0
Year 1	1,147,870	215,000	0
Year 2	412,000	50,000	0
Year 3	10,000	10,000	0
Year 4	10,000	10,000	0
Year 5	10,000	10,000	0
Total	1,569,870	295,000	0

ASSUMPTIONS			
New LPs added	0		
Purchase price/unit	0		
Revenue Assumptions -			
Days: 12	MR	CT	Other
Year 1	10	4	28
Year 2	11	5	30
Year 3	12	6	33
Year 4	12	6	35
Year 5	12	6	37

	Gross Rev/Scan	Total	Contractual
	MR	CT	Other
Year 1	973	525	203
Year 2	973	525	203
Year 3	973	525	203
Year 4	973	525	203
Year 5	973	525	203

	Prof Fees	Billing Fees	Mgt Fees
Year 1	16.00%	3.00%	0.00%
Year 2	16.00%	3.00%	0.00%
Year 3	15.00%	3.00%	0.00%
Year 4	15.00%	3.00%	0.00%
Year 5	15.00%	3.00%	0.00%

	Salary Adj	Benefit Factor	Inflation Rate
Year 1	0.00%	0.00%	0.00%
Year 2	1.50%	1.50%	0.00%
Year 3	1.50%	1.50%	0.00%
Year 4	1.50%	1.50%	0.00%
Year 5	1.50%	1.50%	0.00%
Var Cost/Procedure			
Year 1	33.21	18.00	185.24
Year 2	30.48	18.00	190.49
Year 3	27.98	18.00	176.15
Year 4	27.58	18.00	171.63
Year 5	26.75	18.00	165.84
Bad Debits	0.00%	0.00%	(does not incl interest exp)

HS EBITDA/Avg Net Investment							
HS EBIT/Avg Net Investment							
HS Net Income/Avg Net Investment							
HS Cash Flow/Avg Net Investment							
See Discounted Cash Flow Calculation - 1b							



okmco10 Input 4/13/99 5:37 PM

## Valuation Input

Medical Imaging Center of Oklahoma  
Oklahoma City, OK  
Dr. Tom Woolard

are Footage: 5,600 Estimated  
(Circle Available Mods)  
MRI CT MM US XR

## SALES

Name


ty  
DO / RVP  
ion

## USE PRICE

consideration for HS  
tip % in Partnership Income  
tip % in Partnership Assets  
Rec (Paid)

	Multiple of Adj EBITDA
3,500,000	2.43
100%	
100%	

ing Provided by HS  
Rate (Prime +1 if JV, Prime if 100%)  
nos)

	Prime Rate
9.50%	8.50%
360	

n for HS if acquisition  
Rate  
nos)

2,900,000
8.50%
360

## NCE SHEET

	Total	# of Mos	Term / Days
Receivable	400,000		60
ng Capital			
ng			30
hold Improvements			15
Book Value	525,000		8
al Tangible Assets	925,000		

	Pay Out	Period-Yrs	Term
will Up Front	1,875,000		
will Over Time	200,000	3	40
-Complete Up Front			
-Complete Over Time	500,000		5
total Intangible Assets	2,575,000	14%	

al Assets 2,575,000

ilities	Amount	Term / Days
umption of Seller's liabilities -		
A/P & Other Liabilities		45
Notes Payable & Cap Leases		5

quisition Debt -  
Cash Consideration at closin 2,800,000

## CAPITAL EXPENDITURES "QUOTE FOR MRI ATTACHED

	Equipment	Leaseholds	
Upfront			
Year 1-Replace MRI	1,147,870	215,000	60
Year 2	412,000	50,000	
Year 3-Upgrade CT	10,000	10,000	
Year 4	10,000	10,000	
Year 5	10,000	10,000	

Facility still split bills charges, with MRI Inc still collecting on these charges.  
Back up is in file labeled "Prof Fee Charge & Collect" & is added to Due Oligence.

## INCOME STATEMENT

## SCANS PER DAY

MRI  
CT  
Other Procedures  
Total Procedures

## REVENUES

Gross Revenue  
Adjustments to Revenue  
Contractuals  
Bad Debt

## Net Revenue

## EXPENSES

Salaries & Wages  
Taxes & Benefits  
Contract Labor  
Total Salary Related Expense

Professional (Rad) Fees  
Billing and Collection  
Contract Services  
Medical Supplies  
Utilities (Includes Telephone)  
Other Variable  
Total Variable Expense

Equipment Rental  
Lease/Rent Expense - Bldg  
Equip R&M & Serv Cont  
Depreciation & Amort LHI  
Amortization of Intangibles  
Insurance  
Advertising/Marketing  
Interest  
Management Fees  
Total Fixed Expense  
Total Expenses

Net Inc before Mgmt Fees  
Management Fee

PARTNERSHIP INCOME  
Income Tax  
Other Income (Expense)  
TOTAL INCOME

## HISTORICAL

## Annualized

PY 1997	YTD 1998	Anniz	YTD 1998	Adjustments	Adjusted
# of mos:	12				
	9.94		9.94		9.94
	3.19		3.19		3.19
	27.58		27.58		27.58
	40.71		40.71		40.71

\*\*684,383 in adjustment col. is professional revenue running through MRI, Inc.

	2,479,830	2,479,830	684,383	3,164,213
	2,479,830	2,479,830	684,383	3,164,213

\*\*See staffing list for reduction in staffing cost

	537,781	537,781	(114,402)	423,379
	74,521	74,521		74,521
	10,327	10,327		10,327
	622,530	622,530	(114,402)	508,228

(\*575,000- pulled out in billing salaries down to the billing line item.)

	144,132	144,132	330,500	474,632
	86	86	75,000	75,086
	200,849	200,849		200,849
	45,358	45,358		45,358
	205,149	205,149		205,149
	595,574	595,574	405,300	1,001,074

	82,988	82,988	(82,988)	
	45,120	45,120		45,120
	121,000	121,000		121,000
	106,651	106,651		106,651
	4,867	4,867		4,867
	25,239	25,239		25,239
	20,915	20,915		20,915
	55,433	55,433		55,433
	188,124	188,124	(188,124)	
	650,338	650,338	(271,112)	379,226
	1,868,541	1,868,541	19,986	1,888,528

	611,289	611,289	664,397	1,275,686

	611,289	611,289	664,397	1,275,686
	611,289	611,289	664,397	1,275,686

## ASSUMPTIONS

New LPs added  
Purchase price/unit

## Revenue Assumptions - Current

Volume Increase for CT and Other

	Year 1	Year 2	Year 3	Year 4	Year 5
MR Scans/Day	10	11	12	12	12
CT Scans/Day	3	4	5	6	6
Other Procedures/Day	28	30	33	35	37
Total Procedures/Day	41	47	52	54	56

## Fee Increase

MR Gross Rev/Scans	973	973	973	973	973
CT Gross Rev/Scans	525	525	525	525	525
Annual Total Other Mods	\$203	\$203	\$203	\$203	\$203

## Avg Contractual Adjust

	29.50%	26.70%	29.50%	30.50%	31.50%	32.00%
MR Net Rev/Scans	698	694	686	676	667	662
CT Net Rev/Scans	375	374	370	365	360	357
Total Other Mods	145	145	143	141	139	138

Prof / Rad Fees  
Billing Fees  
Mgt Fees (% of Net Rev)

## Var Cost/Procedure:

	Year 2	Year 3	Year 4	Year 5
	1.50%	1.50%	1.50%	1.50%

## Tulsa City, OK - Medical Imaging Center of Oklahoma - MICO

Other Variable from Income Statement Period Ending 12/31/98

Accounting Fees	\$25,349	-\$16,500	\$8,849
Auto	\$2,100		\$2,100
Bank Charges	\$5,501		\$5,501
Computer Expenses	\$12,565		\$12,565
Consulting	\$2,345	-\$2,345	\$0
Continuing Education	\$2,592		\$2,592
Contribution	\$1,866		\$1,866
Dues & Subscriptions	\$13,626		\$13,626
Filing Fees	\$2,822		\$2,822
Janitorial Services	\$4,200		\$4,200
Legal Fees	\$6,828		\$6,828
Office Supplies	\$21,686		\$21,686
Other Expenses	\$67		\$67
Postage	\$18,031		\$18,031
Plant Rental Expense	\$135		\$135
Permits/Fees	\$28		\$28
Bldg Repairs & Maintenance	\$59,725	-\$32,000	\$27,725
Security	\$126		\$126
Storage Off Site	\$4,246		\$4,246
Taxes - Other	\$18,084		\$18,084
Travel	\$2,907		\$2,907
Visa/Mastercard	\$322		\$322
Total Other Variable	\$205,149	-\$50,845	\$154,304

ROOFING & PLUMBING  
REPAIRS - NON RECURRING

LO 3/7/99

**PROJECT PROFILE**

Project Number: 9801051628

Is this Project a component of an IMP?

☒ Yes ☐ No

If Yes, select IMP:

Type of File *	Diagnostic - Blue	Type of Project *	Acquisition
Product Line	DX	HS Facility Number	(format ex: 040123-00)
Center Name	Medical Imaging Center of Oklahoma	Primary Center Contact: Salutation *	Dr.
Main Address	1145 SW 74th Street	First Name	Tom
Address (2nd Line)	Bldg. A	Last Name	Woolard
City	Oklahoma City	Title	
State *	OK	County	County
Zip	73139	Phone	(800) 322-6213
MSA	Oklahoma City OK MSA	Fax	(405) 631-2400
Legal Name:		Other Phone Numbers	(405) 631-6426(405) 231-9323 Dr. Woolard's Pager
Tax ID Number:		Other Center Contacts	Dr. Clark Ward
Number of Locations *	1	Type of Facility *	Main
Hrs of Operation	Normal Business Operations	Number of Square Feet:	0
		Dollar per Square Feet:	0.00
Status *	07. Documents	Closing(Start) Date	04/21/99
		Expiration Date	
Corp Dev Contact *	Lecia Pate	Ops Contact *	David Jayne
Team Leader *	Melanie Fisher	Attorney Contact *	David Hughes
		MCare Contact *	Documents Out
CON Required?	No	Status:	

**SUMMARY OF CAPITALIZATION EXPENDITURES:**

Leasehold Improvements:	220,000
Equipment:	1,147,870

**ACQUISITION: SUMMARY OF OFFER:**

Type of Purchase *	Asset	
Goodwill	2,075,000	\$1,875,000 at closing \$200,000 over 3 years
Non Compete	500,000	\$0 at closing \$500,000 over 5 years
A/R	0	Earnout Terms: Seller Retaining A/R: Added \$400,000 of Working Capital
Equipment	525,000	Limited Partnership: Yes What %: 6.56%
TOTAL	3,100,000	COMMENTS:

**RETURN:**

Current Cash Flow	\$1,442,637.00	
Cash Flow Multiple	2.15	If > 4, explain:
Return on Investment - ROA	26.71%	
EBIT return	32.17%	If < 25% for IP, 30% for OP, or 35% for all other, explain:
EBITDA return	41.75%	If < 35% for IP, 35% for OP, or 40% for all other, explain:
\$ Purchase Price per visit	\$85,974.00	

## PROJECT PROFILE

Project Number: 9901051620

Is this Project a component of an IMP?



If Yes, select IMP:

Type of File*	Diagnostic - Blue	Type of Project *	Acquisition
Product Line	DX	HS Facility Number	(format ex: 040123-00)
Center Name	Medical Imaging Center of Oklahoma	Primary Center Contact: Salutation *	Dr.
Main Address	1145 SW 74th Street	First Name	Tom
Address (2nd Line)	Bldg. A	Last Name	Woolard
City	Oklahoma City	Title	
State *	OK	County	County
Zip	73139	Phone	(800) 322-8213
MSA	Oklahoma City OK MSA	Fax	(405) 631-2400
Legal Name:		Other Phone Numbers	(405) 631-6426(405) 231-9323
Tax ID Number:		Other Center Contacts	Dr. Woolard's Pager
Number of Locations *	1	Type of Facility *	Dr. Clark Ward
Hrs of Operation	Normal Business Operations	Number of Square Feet:	Main
Status *	07. Documents	Dollar per Square Feet:	0
Closing(Start) Date	04/21/99	Mkt Status *	New Store / Same Market
Expiration Date		MCare Contact *	
Ops Contact *	David Jayne	Documents Out	
Attorney Contact *	David Hughes		
CON	No	Status:	
Required?			

## SUMMARY OF CAPITALIZATION EXPENDITURES:

Leasehold Improvements:	200,000
Equipment:	525,000

## ACQUISITION: SUMMARY OF OFFER:

Type of Purchase *	Asset
Goodwill	2,075,000
Non Complete	500,000
A/R	0
Equipment	525,000
TOTAL	3,100,000

## RETURN:

Current Cash Flow	\$1,442,637.00
Cash Flow Multiple	2.15
Return on Investment - ROA	27.84%
EBIT return	33.44%
EBITDA return	42.86%

If &gt; 4, explain:

If &lt; 25% for IP, 30% for OP, or 35% for all other, explain:

If &lt; 35% for IP, 35% for OP, or 40% for all other, explain:



Year to Date  
 12-31-98

REVENUE  
 FEES  
 REFUNDS  
 INTEREST INCOME  
 OTHER

\$2,978,696.19 120.1  
 (535,298.22) (21.6)  
 35,661.87 1.4  
 770.51 0.0

TOTAL REVENUE

2,479,830.35 100.0

Professional Fee Collected in  
 1998, Inc. 299,333.36  
 2,769,213.68 - TOTAL NET REVENUE

PENSES  
 ACCOUNTING FEES  
 ADVERTISING  
 AMORTIZATION EXP  
 AUTO  
 BANK CHARGES  
 COLLECTION EXP  
 COMPUTER EXPENSE  
 CONSULTING  
 CHEMICALS  
 CONTINUING EDUCATION  
 CONTRACT LABOR  
 CONTRIBUTION  
 COURIER EXP  
 DEPRECIATION  
 DUES & SUBSCRIPTIONS  
 EMPLOYEE BENEFITS  
 EMPLOYEES INS.  
 ENTERTAINMENT & MEALS  
 FILING FEES  
 EQUIP LEASE  
 FILM  
 CONTRAST MEDIA  
 INTEREST  
 INSURANCE  
 JANITORIAL SERVICES  
 LEGAL FEES  
 MAGNET MAINTENANCE  
 MANAGEMENT FEES  
 CYROGENS  
 MEDICAL SUPPLIES  
 MEDICAL SERVICES  
 OFFICE SALARIES  
 OFFICE SUPPLIES  
 OTHER EXPENSES  
 POSTAGE  
 PLANT RENTAL EXP  
 PERMITS/FEES  
 PROMOTIONS

6V	25,349.31	1.0
MLH/Ad.	8,952.07	0.4
	4,866.55	0.2
OV	2,100.00	0.1
OV	5,501.04	0.2
Bill	85.50	0.0
OV	12,565.12	0.5
OV	2,345.00	0.1
MedSup	7,368.18	0.3
OV	2,592.30	0.1
CL	6,140.10	0.2
OV	1,865.60	0.1
CL	4,187.25	0.2
Deprec	106,651.32	4.3
OV	13,625.91	0.5
OV	4,281.29	0.2
OV	25,506.95	1.0
Advert	7,525.67	0.3
OV	2,822.00	0.1
EL	82,988.43	3.3
MS	103,258.42	4.2
MS	24,521.02	1.0
OV	55,433.28	2.2
OV	25,238.92	1.0
OV	4,200.00	0.2
OV	6,827.55	0.3
Rem	121,000.00	4.9
Advert	188,123.58	7.6
MS	35,750.00	1.4
MS	26,216.69	1.1
MS	3,572.73	0.1
Sal	537,781.06	21.7
OV	21,685.85	0.9
OV	66.95	0.0
OV	18,030.61	0.7
OV	135.00	0.0
OV	27.50	0.0
OV	4,437.75	0.2

SEE ACCOMPANYING ACCOUNTANT'S REPORT

MRI OF OKLAHOMA, LIMITED PARTNERSHIP  
 REVENUE & EXPENSES - INCOME TAX BASIS  
 FOR THE PERIOD ENDED DECEMBER 31, 1998

	Year to Date 12-31-98	
RAD FEES	RF 144,132.07 ✓	5.9
RENT	Rnt 45,120.00 ✓	1.3
REPAIRS & MAINTENANCE	ov 59,724.51 ✓	2.3
SECURITY EXP	SV 126.00 ✓	0.0
STORAGE OFF SITE	OV 4,246.11 ✓	0.2
TAXES-PAYROLL	T-P 44,733.25 ✓	1.8
TAXES-OTHER	OV 18,063.78 ✓	0.7
TELEPHONE	UTIL 19,432.80 ✓	0.8
TRAVEL	OV 2,906.90 ✓	0.1
UTILITIES	UTIL 25,925.56 ✓	1.0
VISA/MSTRCD	OV 321.63 ✓	0.0
X-RAY SUPPLIES	MS 162.20 ✓	0.0
TOTAL EXPENSES	1,868,541.48	75.3
NET INCOME	\$ 611,288.87	24.7

SEE ACCOMPANYING ACCOUNTANT'S REPORT

September	79	\$	13,493	\$	-	\$	171
October	109	\$	17,294	\$	-	\$	159
November	103	\$	18,481	\$	-	\$	179
December	107	\$	18,743	\$	-	\$	175
Total	1,258	\$	225,594	\$	-	\$	
AVERAGE	105	\$	18,799	\$	-	\$	179

**Mammography**

Month	# of Scans	Revenue	Collections	Rev/Scan
January	410	\$ 33,366	\$ -	\$ 81
February	434	\$ 35,538	\$ -	\$ 82
March	421	\$ 34,992	\$ -	\$ 83
April	449	\$ 37,290	\$ -	\$ 83
May	370	\$ 30,236	\$ -	\$ 82
June	429	\$ 35,646	\$ -	\$ 83
July	374	\$ 30,778	\$ -	\$ 82
August	319	\$ 26,220	\$ -	\$ 82
September	458	\$ 36,911	\$ -	\$ 81
October	548	\$ 44,534	\$ -	\$ 81
November	449	\$ 36,729	\$ -	\$ 82
December	459	\$ 38,247	\$ -	\$ 83
Total	5,120	\$ 420,538	\$ -	
AVERAGE	427	\$ 35,045	\$ -	\$ 82

**X-Ray**

Month	# of Scans	Revenue	Collections	Rev/Scan
January	43	\$ 4,139	\$ -	\$ 96
February	40	\$ 3,364	\$ -	\$ 84
March	81	\$ 6,621	\$ -	\$ 82
April	79	\$ 6,734	\$ -	\$ 85
May	46	\$ 3,223	\$ -	\$ 70
June	47	\$ 3,728	\$ -	\$ 79
July	31	\$ 2,147	\$ -	\$ 69
August	28	\$ 2,009	\$ -	\$ 72
September	44	\$ 3,953	\$ -	\$ 90
October	79	\$ 3,364	\$ -	\$ 45
November	28	\$ 2,600	\$ -	\$ 93
December	26	\$ 1,763	\$ -	\$ 68
Total	572	\$ 43,844	\$ -	
AVERAGE	48	\$ 3,654	\$ -	\$ 77

**TOTAL**

Month	# of Scans	Revenue	Collections	Rev/Scan
January	873	\$ 307,873	\$ 216,556	\$ 353
February	889	\$ 315,957	\$ 259,717	\$ 355
March	902	\$ 317,241	\$ 245,516	\$ 352
April	936	\$ 316,333	\$ 187,394	\$ 358
May	776	\$ 299,335	\$ 234,824	\$ 386
June	853	\$ 290,493	\$ 196,804	\$ 341
July	767	\$ 269,854	\$ 229,700	\$ 352
August	717	\$ 272,659	\$ 168,795	\$ 380
September	866	\$ 291,670	\$ 136,220	\$ 337
October	1,020	\$ 295,313	\$ 179,177	\$ 290
November	828	\$ 299,425	\$ 204,415	\$ 362
December	855	\$ 295,930	\$ 183,672	\$ 346
Total	10,282	\$ 3,572,082	\$ 2,442,789	
AVERAGE	857	\$ 297,873	\$ 203,566	\$ 347

**Referring Physicians:**

Name	Specialty	# of Referrals	\$ of Referrals	% of Referrals	Type of Referral	% Ownership
------	-----------	----------------	-----------------	----------------	------------------	-------------

A. Cruise, D.O.	Ortho	-	\$	130,179	0%	0	0%
G. Smith, D.O.	Ortho	-	\$	124,705	0%	0	0%
Tinker Air Force	Mix	-	\$	112,145	0%	0	0%
R. Langerman, O.D.	Ortho	-	\$	75,342	0%	0	0%
T. McDermott, D.O.	ER Med	-	\$	67,808	0%	0	0%
H. Seradge, M.D.	Ortho	-	\$	66,192	0%	0	0%
G.D. Casper, M.D.	Ortho	-	\$	29,923	0%	0	0%
T. Ewing, D.O.	Ortho	-	\$	50,621	0%	0	0%
J. Rosacker, M.D.	Ortho	-	\$	28,526	0%	0	0%
J. Minter, D.O.	Ortho	-	\$	49,614	0%	0	0%

**COLLECTION % ANALYSIS**

Month	Current	6 Month	9 Month	Net Revenue	\$	228
March	80%			Per Scan		
April	59%					
May	74%					
June	62%					
July	77%					
August	58%	68%				
September	50%	64%				
October	66%	65%				
November	70%	64%	64%			
Total	66%	65%	65%			

Comments:

+ 70.16: Professional Fee Net  
 298.16 INCOME (SEE DUE DILIGENCE  
 & PROF. FEE)  
 TOTAL  
 NET  
 REVENUE

**ACCOUNTS RECEIVABLE ANALYSIS:**

Month	Dollars	Percent
Current	\$ 295,930	31%
31-60	\$ 71,225	8%
61-90	\$ 58,844	6%
91-120	\$ 35,653	4%
121-150	\$ 483,278	51%
151+	\$ -	0%
Total	\$ 944,930	100%
Credit Balance	\$ -	
Debit Balance A.R.	\$ 944,930	

**A/R VALUATION:**

Debit Balance A/R	\$ 944,930
Discount Rate	35.52%
Reserve For Contractual	\$ 335,395
Account 121-150 Days	\$ 483,278
Collection Rate	65%
Cash Value 121-150 Days	\$ 316,484
Bad Debt Percentage	80%
Reserve For Bad Debt	\$ 253,187
Account >151 Days	\$ -
Collection Rate	65%
Cash Value >151 Days	\$ -
Bad Debt Percentage	90%
Reserve For Bad Debt	\$ -

Type of Valuation Used:	Discount / Aging Method	XXXXXXXX
	Net A/R Days Method	

**ACCTS. RECEIVABLE SUMMARY VALUATION**

(Discum/Aging Method)		
Gross Accounts Receivable	\$	944,930
Reserve for Contractuals	\$	333,395
Reserve for Bad Debt 120-129	\$	253,137
Reserve for Bad Debt 130+	\$	-
Credit Balances	\$	-
A/R Cash Value	\$	356,148

**CONTRACTUAL ADJUSTMENT PERCENTAGE**

FINANCIAL CLASS	PERCENT OF REVENUE	F.S.C. DISCOUNT RATE	PROFORMA PERCENT OF REVENUE	YEAR 1 PRO FORMA DISCOUNT %	YEAR 2 PROFORMA DISCOUNT %	YEAR 3 PROFORMA DISCOUNT %
Medicare	7%	48%	7%	3.36%	3%	4%
Work Comp	16%	30%	16%	4.72%	5%	5%
Commercial	4%	0%	4%	0.00%	0%	0%
Medicaid	3%	100%	3%	3.00%	3%	3%
Other	0%	0%	0%	0.00%	0%	0%
HMO / PPO	53%	30%	53%	15.64%	17%	19%
Blue Cross	7%	30%	7%	2.07%	2%	2%
Atty Liab	7%	30%	7%	2.07%	2%	2%
Self Pay	1%	0%	1%	0.00%	0%	0%
Capitation	2%	30%	2%	0.59%	1%	1%
Bad Debt	0%	0%	0%	3.00%	3%	3%
Total	100.00%		100.00%	34%	36%	38%

CURRENT ACQUISITION REVENUE PER SCAN	\$	347		
CURRENT ACQUISITION NET REVENUE PER SCAN	\$	228		
		YEAR 1	YEAR 2	YEAR 3
PROPOSED GROSS REVENUE PER SCAN	\$	347	\$ 347	\$ 347
PROPOSED NET REVENUE PER SCAN	\$	228	\$ 222	\$ 213
PROPOSED CHANGE IN NET REVENUE PER SCAN		0%		
REVENUE MIX OBTAINED FROM:				
XXXXXXXXXXXX	COMPUTER GENERATED REPORT			
	ESTIMATED BY FACILITY STAFF			
	OTHER (SPECIFY)			

**Assignability of HMO/PPO Contracts**

Payor	Assignment	Comments
Blue Lines	0	Contract has a capitated agreement for Mammography only
Blue Lines	0	HMO contract covers Diagnostic Rad., Breast US.
0	0	Diag. Mammography & MRI
CompMed	Yes	Written Consent
Prudential	Yes	Written Consent
HealthChoice	????	No assignability clause
Aetna	????	No assignability clause
Foundation	????	No assignability clause

OTHER COMMENTS:



Other Income:

## Professional Fees for MICO

Month	Scans	Charges	Payments
January	585	\$ 56,036	\$ 72,399
February	467	\$ 74,614	\$ 87,709
March	502	\$ 64,160	\$ 61,161
April	587	\$ 68,862	\$ 57,071
May	622	\$ 62,206	\$ 54,619
June	486	\$ 57,221	\$ 56,983
July	430	\$ 55,862	\$ 54,564
August	472	\$ 55,824	\$ 44,868
September	471	\$ 57,858	\$ 51,749
October	450	\$ 60,137	\$ 43,568
November	392	\$ 61,018	\$ 54,993
December	1514	\$ 73,787	\$ 44,700
Total	6978	\$ 747,585	\$ 684,383

Collection Rate 0.65487

Gross Rev/Scan \$ 107.13 \*Gross revenue divided by total scans  
 Net Rev/Scan \$ 70.16 \*Gross revenue per scan multiplied collection rate

Note the revenues demonstrated in the spreadsheet are not included in the above statistical data; therefore, with the combination of both spreadsheets the sum is \$298/scan.

Month	Net Collections	Professional Fees	Bank Statements
January	\$ 216,556	\$ 72,399.04	\$ 273,744.91
February	\$ 259,717	\$ 87,708.64	\$ 303,476.47
March	\$ 245,516	\$ 61,161.36	\$ 297,777.53
April	\$ 187,394	\$ 57,071.37	\$ 238,372.14
May	\$ 234,824	\$ 54,619.19	\$ 273,216.50
June	\$ 196,804	\$ 56,983.28	\$ 244,710.01
July	\$ 229,700	\$ 54,564.04	\$ 275,266.22
August	\$ 168,795	\$ 44,868.03	\$ 207,779.73
September	\$ 136,220	\$ 51,748.77	\$ 183,902.18
October	\$ 179,177	\$ 43,567.56	\$ 213,702.98
November	\$ 204,415	\$ 54,992.53	\$ 245,119.25
December	\$ 183,672	\$ 44,699.55	\$ 220,628.27
Total	\$ 2,442,788.72	\$ 684,383.36	2,977,696.19

Referral Update  
Comparison:

Referring Physicians: January - December 1998 12 months

Name	Specialty	# of Referrals	\$ of Referrals	% of Referrals	% of Referrals	% wnership	Type of Referral
A. Cruse, D.O.	Ortho	143	\$ 123,669.88	1.3%	3.4%		
G. Smith, D.O.	Ortho	175	\$ 157,009.72	1.7%	4.4%		
Tinker Air Force	Mix	478	\$ 259,854.77	4.5%	7.2%		
R. Langerman, O.D.	Ortho	76	\$ 70,431.16	0.7%	2.0%		
T. McDermott, D.O.	ER Med	32	\$ 30,540.20	0.3%	0.9%		W. Comp
H. Seradge, M.D.	Ortho	214	\$ 92,447.64	2.0%	2.6%		Arms/Hands
G.D. Casper, M.D.	Ortho	11	\$ 9,219.98	0.1%	0.3%		Spine
T. Ewing, D.O.	Ortho	23	\$ 13,194.54	0.2%	0.4%		
J. Rosacker, M.D.	Ortho	50	\$ 48,578.20	0.5%	1.4%		
J. Minter, D.O.	Ortho	0	\$ -	0.0%	0.0%		
J. Pardee, M.D.	ER Med	30	\$ 21,002.54	0.3%	0.6%		W. Comp
C. Coddington, M.D.	Rheumatologist	312	\$ 102,381.21	2.9%	2.8%		
M. Woodward, M.D.	Fam. Med.	484	\$ 127,735.53	4.6%	3.6%		

Overall Totals 10602 \$ 3,592,776

272 Referrals  
deducted  
from  
Total Referrals:  
year 1.

Referring Physicians: October '96 - May '97 8 months

Name	Specialty	# of Referrals	\$ of Referrals	% of Referrals	% of Referrals	% wnership	Type of Referral
A. Cruse, D.O.	Ortho	171	\$ 130,178.79	5.0%	5.0%		
G. Smith, D.O.	Ortho	163	\$ 124,705.00	4.7%	4.3%		
Tinker Air Force	Mix	310	\$ 112,145.45	9.0%	4.3%		
R. Langerman, O.D.	Ortho	94	\$ 75,342.00	2.7%	2.9%		
T. McDermott, D.O.	ER Med	88	\$ 67,808.00	2.6%	2.6%		W. Comp
H. Seradge, M.D.	Ortho	85	\$ 66,191.78	2.5%	2.5%		Arms/Hands
G.D. Casper, M.D.	Ortho	43	\$ 29,922.78	1.2%	1.1%		Spine
T. Ewing, D.O.	Ortho	100	\$ 50,621.40	2.9%	1.9%		
J. Rosacker, M.D.	Ortho	41	\$ 28,526.00	1.2%	1.1%		
J. Minter, D.O.	Ortho	97	\$ 49,613.98	2.8%	1.9%		
J. Pardee, M.D.	ER Med	74	\$ 47,718.00	2.1%	1.8%		W. Comp
C. Coddington, M.D.	Rheumatologist	76	\$ 42,911.64	2.2%	1.6%		
M. Woodward, M.D.	Fam. Med.	190	\$ 42,653.87	5.5%	1.6%		

Overall Totals 3,443 \$2,612,081

**HEALTHSOUTH Corporation**

Diagnostic Due Diligence

Managed Care Questionnaire

Project Name:	MICO
Due Dil. #:	97141
City:	Oklahoma City
State:	OK
Scans/Day:	43
HMO/PPO Mix:	53%

Financial Analyst:

1) What is HEALTHSOUTH's HMO/PPO net revenue per CT scan in the state and city / MSA?

City/MSA (or closest) OK City

County of Project \_\_\_\_\_

Dates Used: \_\_\_\_\_

Net revenue Per MRI Scan Amount: 5795 Net Revenue for all Modalities combined: \$301

2) What is the project's current HMO/PPO net revenue per visit?

Based on MRI scan of the L-Spine average 5632

3) Are there any worker's compensation managed contracts that are significant? What is the reimbursement?

WC is 16% of the mix

COMP MED

4) Can we detail the Blue Cross product lines? If so, what is the mix and reimbursement of each?

BC/BS is 7% of the mix

MICO's charge for MRI of L-Spine - \$1,980.00

Fee Schedule

Maximum Reimbursement Allowance

Blue Tradit Exc MRI L-sp	28.30 x 60.00	\$	1,728.00	13%
Blue Choice:	38.80 x 54.00	\$	1,533.00	21%
Blue Preferred:	28.80 x 44.42	\$	1,279.00	15%
	28.80 x 53.92	\$	1,553.00	22%

HMO/Blue Lines\* CAP Payment Amt: \$ 28 Per Member Per Month

Project's Existing Managed Care Contract Information:						Expected Reimb As		
Payer	% Total Rev	Assignable (Y/N)	Type of Contract (HMO/PPO/CAP)	Type of Scan (See below *)	Avg. Reimb. Per Visit	HEALTHSOUTH Facility	Is the payer under Network, IPA (Y/N)	Network or IPA Name
ComMed	2%	Yes	0	MRI w/woc	\$ 780		0	0
Prudential	1%	Yes	0	MRI L-spine w/woc	\$ 645		0	0
HealthChoice	1%	No Assign	0	CT Brain w/woc	\$ 506		0	0
Aetna	1%	No Assign	0	MRI C-spine	\$ 613		0	0
Foundation	12%	No Assign	0		\$ -		0	0
Cigna		Yes	0	0	\$ -		0	0
Focus		???	0	Mammo/Screen	\$ 69		0	0
MCO		Yes	0		\$ -		0	0
HHPO		Yes	0		\$ -		0	0
Integrus		No Assign	0		\$ -		0	0
UtilMed		No Assign	0		\$ -		0	0
Blue Lines HMO	2%	???	CAP	Mammo	\$ -		0	0
BC/BS	7%	???	0	MRI L-spine w/woc	\$ 390		0	0
Chambers/Ticare		???	0	MRI Pelvis w/	\$ 491		0	0

\* CAPITATION = CA

PER DIEM = PD

CASE RATE = CR

% OF CHARGES = PC

FEE SCHEDULE = FS

OTHER = OT

Managed Care Contact Person:

1) Please fill in the expected reimbursement as a Healthsouth facility section in grid above.

2) Are there any payors / networks listed above with which HEALTHSOUTH could have problems with assignability of the contract?YES ☒ NO ☒

If yes, please list and identify reasons.

It appears that development has listed some plans such as Foundation, HealthChoice etc as payer who will not assign assign I feel confident that I can get these agreements assigned or new agreements completed, however, with the payer listed as Integrus I do not believe I will be able to assign this agreement.

3) Are there any significant existing contracts of the seller in which you know of a forthcoming change in reimbursement?

Please include any contracts listed above in which Healthsouth is in the process of renegotiating a lower rate.

Medical Imaging Center of Oklahoma  
Oklahoma City, OK

Current Staffing

Employee	Employee #	Title	Earnings/Hour	Yearly Salary	
Michelle Tyner	9028	MRI/CT Tech	23.06/hour	\$ 47,964.80	
Sa A. Stewart	9039	Mammo Tech	14.25/hour	\$ 29,640.00	
Jane Skinner	7005	Mammo Tech	14.00/hour	\$ 29,120.00	
Michele E. Fieck	9024	MRI/CT Tech	20.43/hour	\$ 42,494.40	
Mauna L. Henderson	9054	Ultrasound Tech	20.00/hour	\$ 41,600.00	
Macalan Taylor	5005	Business Manager	9.37/hour	\$ 19,489.60	
Marsha G. Bowling	5017	Transcriptionist	11.00/hour	\$ 22,880.00	
Julia Fulton	9027	Executive Director	Salary	\$ 75,000.00	60
Terri R. Douglas	9037	Coding/Data Entry	12.00/hour	\$ 12,480.00	*Joc Shares with Brenda Adams
Brenda L. Adams	2075	Coding /Data Entry	12.00/hour	\$ 12,480.00	*Joc Shares with Terri Douglas
Donner M. Campbell	9059	Scheduler	8.00/hour	\$ 16,640.00	
Pamela J. Flinton	9025	Marketing	Salary	\$ 38,200.00	
Total				\$ 387,988.80	
Seller has agreed to reduce salaries by \$30,000 prior to closing				\$357,988.80	

Salary Adjustments in Proforma

Decrease in Salaries from the Annualized # of \$431,131 is due to the following employees who are no longer employed by MICO, but salaries remain in the annualized salary number.

Bob Baldwin	Bus. Man	Salary	\$40,000.00
Replaced by Macalan Taylor w/ no increase in salary			\$19,489.60
Jane Inman	Head Tech	Salary	\$48,000.00
Replaced by Michele Fieck			\$42,494.00
Mike O'Neal	Techn	\$19.72	\$41,017.00
Was not replaced			
Marti Crissup	Data Entry	\$9.00	18,720.00
Was not replaced			

ALSO, THERE IS \$106,650.97 RUNNING THROUGH THE ANNUALIZED SALARIES WHICH ARE BILLING EMPLOYEES. THIS COST HAS BEEN SHIFTED DOWN TO THE BILLING LINE ITEM IN VARIABLE EXPENSES.



**Ultrasound**

Acuson 128 XP Computer Sonography Sys 12/31/93 153,000.00

It has the capability of performing 2-D imaging, Spectral Doppler, Color Doppler Imaging Fetal M-mode, and obstetrical and vascular calculations. The resolution and clarity provides for clear visualization of the tissues being imaged. The system has a single viewing monitor which is attached to the complete unit.

Value  
\$40,000

Upgrade/new

Laerdal - Infant Rescue

11/12/93

284.26

DuPont Camera

1/30/95

4,411.95

Adv-ing CCD Camera

4/13/95

6,525.90

Transducer - Arterial Pressures

4/29/96

3,229.80

\$3,000

**Mammography**

Corad MII

3/1/95

21,675.00

\$10,000

\$70,000

Basic screening Machine

25-40 KV

200MAS maximum

Moly target and filter

Aluminum filter for higher KV usage

Short source to image distance

Mammo processor

10/21/96

7,044.38

\$4,000

**MRI**

GE Signa 1.5 Tesla

4/24/91

2,082,430.75

\$500,000

4x System with Mag Transfer and Phased Array

Ant/Post Neck Coil

7/25/91

12,525.00

Optical Disc

7/27/92

18,254.87

Phased Array

9/15/92

225,311.70

Scanner Component

12/14/92

947.35

Coils

9/1/93

13,189.60

Pulseoximeter

11/22/93

4,159.40

Breast Coils

2/25/94

19,665.55

Independent Console

5/24/94

184,237.50

New Door MRI

8/11/94

3,200.00

Breast Coils

5/25/95

1,025.00

Shoulder Coil

5/15/97

7,050.00

3/31/99  
GE will allow  
250,000 for  
trade in on  
this equipment.

~~1,000,000  
Upgrade to  
a Horizon  
+ Mobile Rental  
\$65,000~~

**CT**

GE Syslec 3000i

9/1/93

388,854.00

\$100,000

with Front Load Iodine injector

Optical Disk

8/9/95

1,308.23

Storage Units

7/3/97

4,860.00

**X-ray**

Fluoroscopy Diagnostic Xray GE Flouricon

2/5/92

11,704.06

\$2,000

2 view box

7/1/93

584.55

Xray IV Pole

11/22/93

641.45

Xray Table

7/12/94

600.00

\$659,000

(250,000)

409,000

Medical Imaging of Oklahoma City				
Oklahoma City, OK				
Repair & Maintenance Overview				
Modality	Contract	Current Cost	Year 1	Year 2 & 3
MRI	Yes	\$ 144,000.00	\$ <del>50,466.00</del>	\$ <del>125,000.00</del>
CT	No: P&L	\$ 5,000.00	\$ 56,630.00	\$ 56,630.00
MM	No: P&L	\$ 850.00	\$ 8,000.00	\$ 8,000.00
U/S	Yes	\$ 13,700.00	\$ 13,700.00	\$ 15,000.00
X-Ray	No: P&L	\$ 213.00	\$ 13,500.00	\$ 13,500.00
Total		\$ 163,763.00	\$ 142,230.00	\$ 218,130.00

✓ 2

116,000 MRI

60,000 CT

36,000 OTHER (MM, US, & R)

212,000 YR 2 PER D. J. N. 2-5 ✓